HH

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

09 544910

CLAIMS AS FILED - PART I (Column 1) (Column 2)								_	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
FOR			NUMBER FILED			NUMBER EXTRA		lr	RATE	FEE]	RATE	FEE
ВА	SIC FEE								:	345.00	OR		690.00
то	TAL CLAIMS		35	minus :	20= *	15			X\$ 9=	:	OR	X\$18=	270-
IND	EPENDENT CL	.AIMS	K) minus	3 = *	2			X39=		OR	X78=	156-
MULTIPLE DEPENDENT CLAIM PRESENT									+130=		OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2								L	TOTAL		OR	TOTAL	1116 -
CLAIMS AS AMENDED - PART II									SMALL I	ENITITY	OR	OTHER SMALL	
			umn 1) AIMS	1		olumn 2) IGHEST	(Column 3)	Г	SWALL			SWALL	
AMENDMENT A		REMAINING AFTER AMENDMENT			PRE	UMBER EVIOUSLY AID FOR	PRESENT EXTRA	ķ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*		Minus	***		=		X39=	(0)	OR	X78=	-
	FIRST PRESE	NIAIIC	ON OF MU	JETIPLE DEI	ENDE	-NI CLAIM	·		+130=		OR	+260=	
								L	TOTAL			TOTAL	
								Α	DDIT. FEE			ADDIT. FEE	
			umn 1) AIMS			olumn 2) IGHEST	(Column 3)	· -					
AMENDMENT B		REMAININ AFTER AMENDMEI				UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	<u> </u> *		Minus	***		= .		X39=		OR	X78=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+130=			+260=	
								L			OR	+200≡ TOTAL	
	TOTAL ADDIT. FEE												
			umn 1)			olumn 2)	(Column 3)						
AMENDMENT C		REM AF	AIMS AINING TER IDMENT		N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
	Total	*	DIVICION	Minus	**	AID I OII	=		X\$ 9=	FEE	00	X\$18=	FEE
	Independent	*		Minus	***		=	-	X39=		OR		
٧	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								V29=		OR	X78=	
	f the entries setu	mm 4 to 1	th ''		^	unite HOT !			+130=		OR	+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											OR	TOTAL ADDIT. FEE	
	If the "Highest Nu The "Highest Num	mber Pre	eviously Pai viously Pai	aid For' (Ni TH) d For' (Total o	r Indepe	UE IS less that endent) is the	n 3, enter "3." highest numbe		_	ropriate box			